

## Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development: see Overview of Kentucky's State Performance Plan Development Process document.

*(The following items are to be completed for each monitoring priority/indicator.)*

Monitoring Priority: EARLY INTERVENTION SERVICES IN NATURAL ENVIRONMENTS

Indicator 1 – Percent of infants and toddlers with IFSP's who receive the early intervention services on their IFSP's in a timely manner. (20 USC 1416(a) (3) (A) and 1442)

Measurement: Percent = # of infants and toddlers with IFSP's who receive the early intervention services on their IFSP's in a timely manner divided by the total # of infants and toddlers with IFSP's times 100.

Overview of Issue/Description of System or Process:

The timely services measurement system for Kentucky includes:

1. Policies and procedures to guide timely services practices
2. Provision of training and technical assistance supports to administrators and service providers in the provision of timely services
3. Quality assurance and monitoring procedures to ensure the accuracy of the timely services data
4. Data system elements for timely services data input and maintenance, and timely services data analysis functions

Each of these is described below:

The State of Kentucky has adopted twenty-one (21) calendar days from the IFSP to the start of services as the definition of "timely" delivery of services. This definition was derived taking into consideration this program's philosophy as a family centered program. As a family centered program, the family drives the system of service delivery. As a result, everyday family events (vacations, illnesses, appointments) that could delay the process were taken into consideration in determining 21 days as our definition of timely.

The State of Kentucky has also adopted use of a consultative model of service delivery. This model emphasizes family education of early intervention goals and service delivery, such that families can more completely implement early intervention goals on a daily basis, thereby deemphasizing the need for frequent therapy services. As a result, many therapeutic services will only be provided on a bimonthly or monthly basis. The use of such a consultative model of service delivery, deemphasizing the more traditional "medical model" of weekly service delivery, was also therefore taken into consideration when defining "timely" service delivery.

1. Policies and procedures to guide timely services practices

Kentucky has adopted the use of a consultative model of service delivery, emphasizing family education to carry out the goals on a daily basis. The family is the constant in the child's life and this process provides services to the child through their caregiver. This model empowers the family and supports the family, not the professional goals. The family identifies their needs/concerns and providers appropriate to meet the identified needs and they become part of the IFSP team. The

family drives the IFSP team and together they determine a “primary” provider who will see the child more frequently and work closely with other providers on the IFSP.

**2. Provision of training and technical assistance supports to administrators and service providers in the provision of timely services**

Kentucky’s current providers have already been trained on use of a consultative model for service delivery. On going support for providers is given by our seven (7) regional technical assistance teams (TAT), most of which are based in regional universities. The current providers will need training on Kentucky’s current definition of “timely” delivery of services, which will also be provided by the TAT’s. New providers entering the First Steps system will receive training regarding “timely” delivery of services and use of a consultative model of service delivery by the TAT’s during the required orientation.

**3. Quality assurance and monitoring procedures to ensure the accuracy of the timely services data**

Kentucky did not monitor providers for timely services during this reporting period. However Central Billing and Information System (CBIS) collects reliable data on timely services. In the future, Program Evaluators will verify with each provider that services are timely and cite them accordingly if timely services are not provided.

**4. Data system elements for timely services data input and maintenance, and timely services data analysis functions**

Data regarding the initiation date of services after the start of the IFSP will be gathered from information provided to Central Billing and Information Systems (CBIS) by the service coordinator. It is entered manually by data entry personnel at CBIS into fields designed to capture the data to determine if early intervention services were delivered in a “timely” manner defined as twenty-one (21) calendar days.

**Baseline Data for FFY 2004 (2004-2005):**

Statewide during fiscal year 2005 (July 1, 2004 through June 30, 2005) 96.7% of all children in Part C received services on their IFSP’s in a timely manner (Figure 1).

Services considered timely include the following:

- Initial (new) IFSP’s where therapeutic services were initiated in less than 3 weeks (21 days or less) from the initial IFSP meeting date
- Initial (new) IFSP’s where the child was receiving service coordination only
- Existing (old) IFSP’s where services continued uninterrupted

Percentages are based on a total of 7,459 total eligible Part C children served throughout the fiscal year.

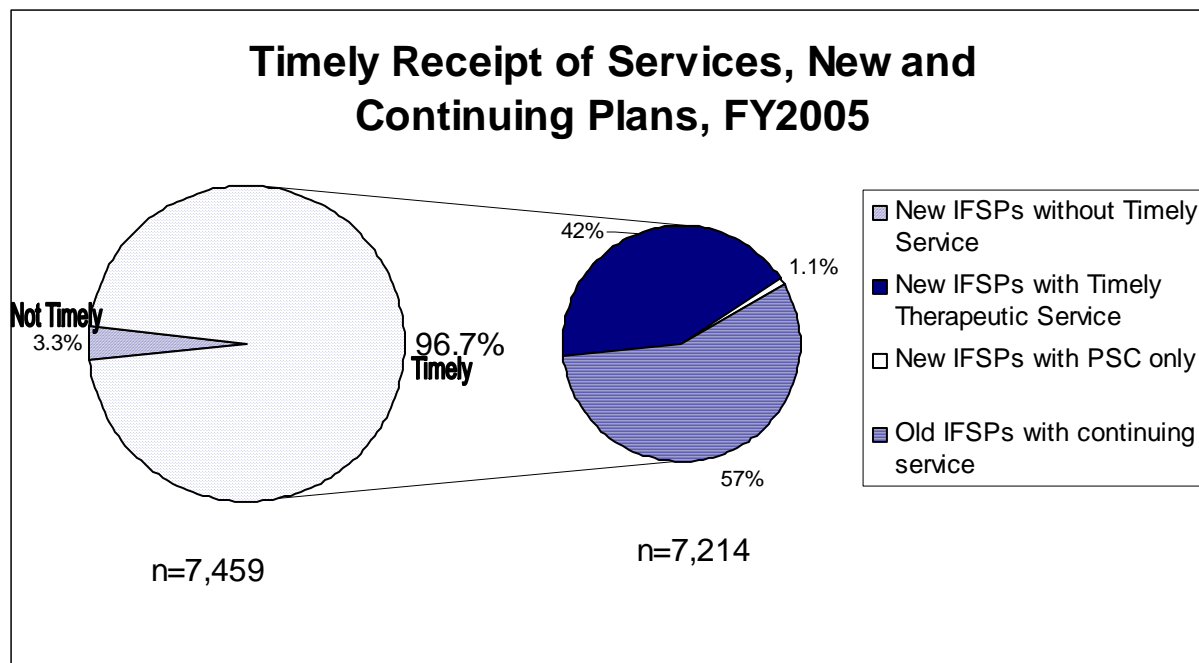


Figure 1

For the 245 children who did not receive timely services, the majority (41%) did receive services within 4 weeks (Figure 2). Some of these children may have only required service once per month. This left only 59% (or 147 children, which was only 2% of the overall eligible children served during the year) who took more than a month to receive their first therapeutic service. Some districts may have had a shortage of providers, and some children had health issues that prevented timely service.

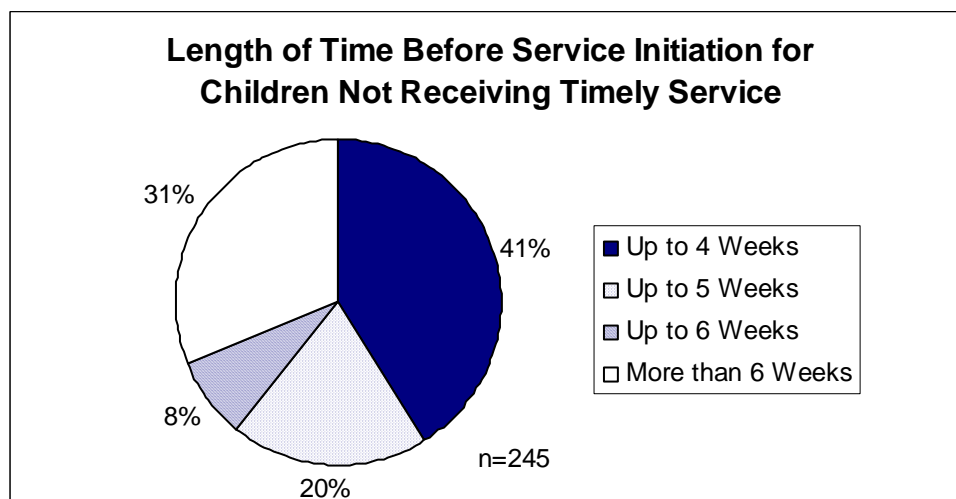


Figure 2

*District Data*

Figure 3 shows the percent of children in Part C receiving timely services by district compared to the state. Although most districts are very similar, urban centers show some of the highest percentages. These are KIPDA (97%), Barren River (98%), Lincoln Trail (97%), Purchase (98%), Northern Kentucky (96%), FIVCO (98%), and Bluegrass (98%). Buffalo Trace also had a high percentage (98%). It is a small district with the fewest number of Part C children of any district. It is noteworthy that the mountainous, eastern districts have lower percentages of children receiving timely service (Lake Cumberland (96%), Cumberland Valley (94%), Kentucky River (95%), and Big Sandy (94%)). These are areas where access to providers and access to major highways are issues in Kentucky. Gateway (97%) is a moderately sized district that lies between Lexington and Ashland. Although in Eastern Kentucky, access may not be as problematic as elsewhere because Interstate 64, a main east-west thoroughfare, cuts across the Gateway district. Green River also had a lower percentage (94%). Green River includes the city of Owensboro, but is mostly rural in its makeup and has no major intersecting interstates.

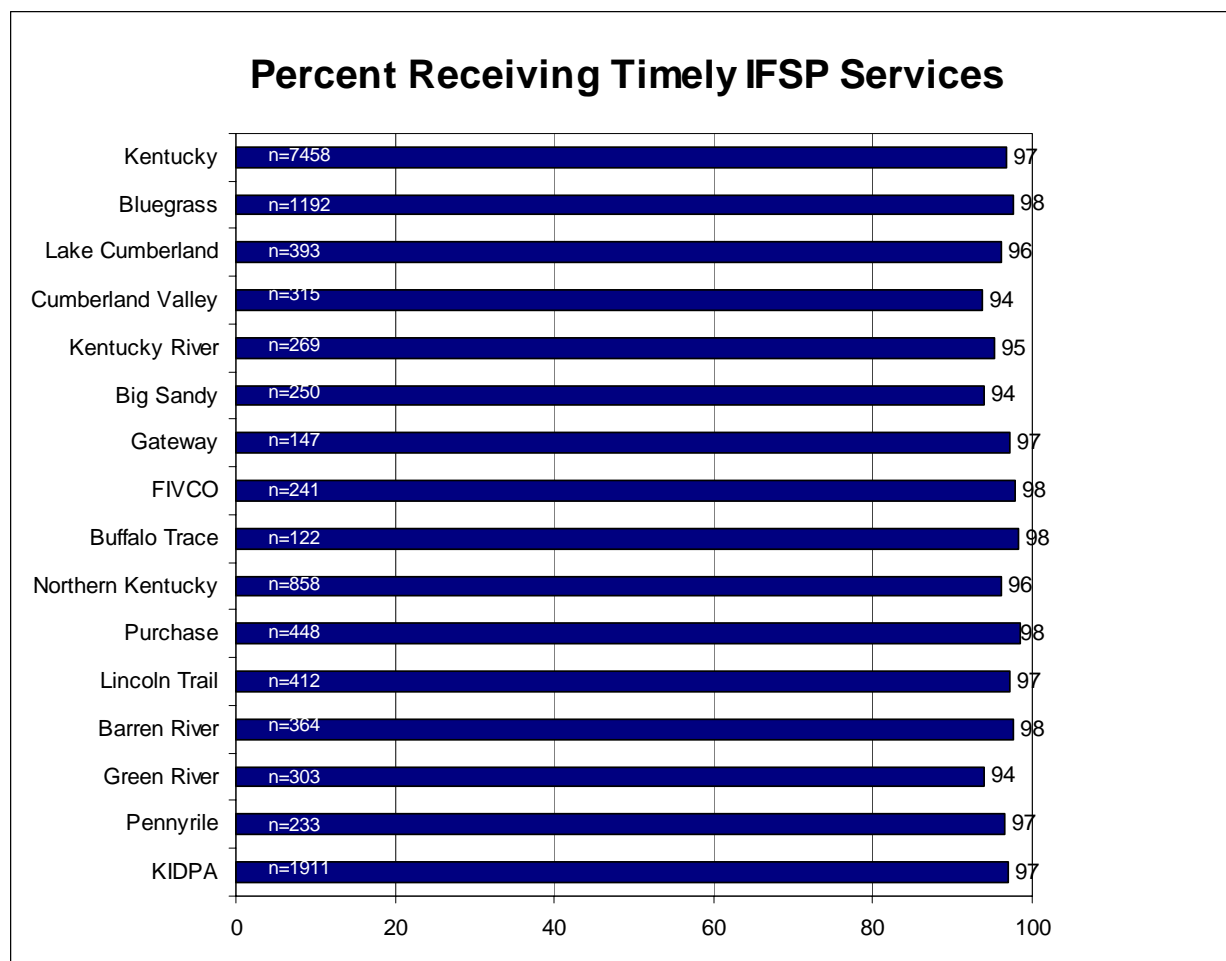
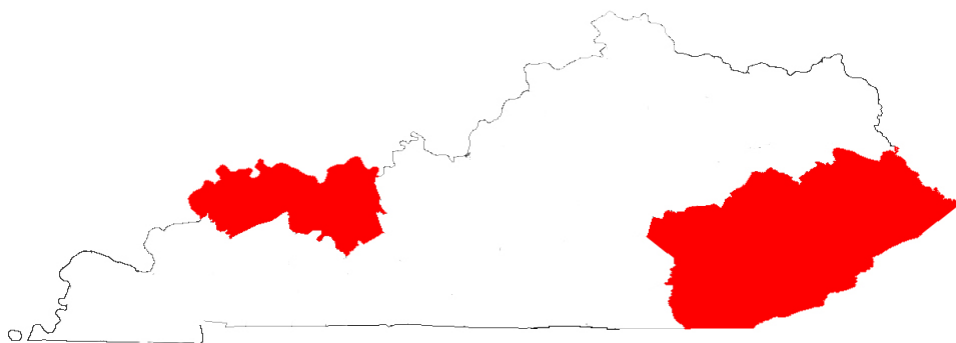
**Figure 3**

Figure 4 graphically shows that the districts with the lowest percentages of infants and toddlers receiving timely services are clustered in specific geographic areas. The three districts making up the large area on the right of the map are all in very rural, mountainous regions in Kentucky. The smaller area on the left is the Green River District and is a mixed urban and rural region located between the population centers of Louisville and Paducah.

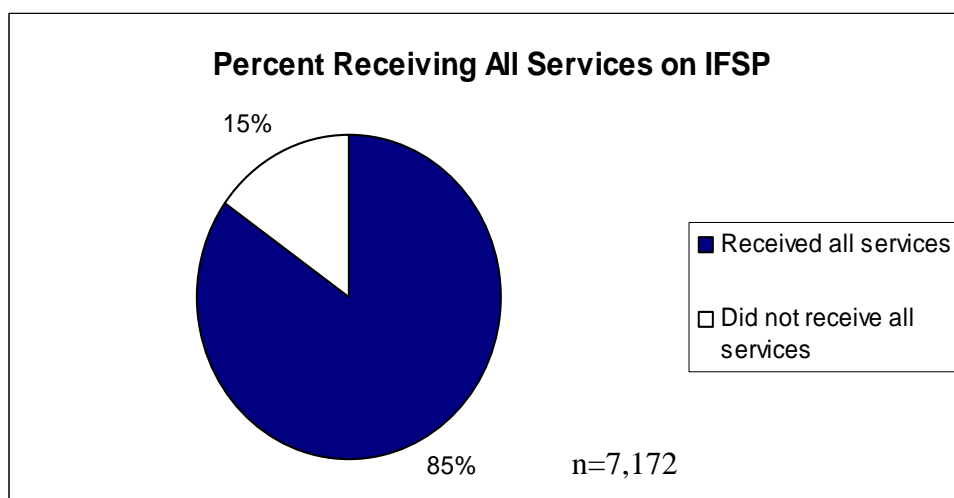
**Kentucky Districts With 95% or Less  
Receiving Timely IFSP Services**



**Figure 4**

*IFSP Services Actually Delivered*

Figure 5 shows the percentage of IFSP services actually delivered. This percentage was computed by comparing the number of services listed on the IFSP to the number of services actually billed during the fiscal year. A total of 85% of children received all the services listed on their IFSP's.



**Figure 5**

As noted in the data in Figure 5, 15% of children did not receive all services identified on the IFSP. Kentucky bases their six (6) month plans on a twenty-four (24) week cycle rather than a twenty-six (26) week cycle to allow for missed appointments and vacations. Kentucky's previous philosophy

was to include the maximum number of units that might be needed within the IFSP and then document the reasons why the child did not receive the service. These reasons needed to be agreed upon between the provider and the family and as long as documentation was presented, no citing was done. Kentucky thought that this was the “spirit” of the regulation. Kentucky’s Interagency Coordinating Council (ICC) Financial Committee previously recommended our goal on services received as being 80% of services provided and that under serving would be considered anything less than 80%. As a result, 85% at that time was deemed appropriate. Therefore, Kentucky has never addressed this as “noncompliance” since we had exceeded the ICC’s goal.

<b>FFY</b>	<b>Measurable and Rigorous Target</b>
<b>2005</b> (2005-2006)	<b>100% of infants and toddlers with IFSP’s will receive the early intervention services on their IFSP’s in a timely manner.</b>
<b>2006</b> (2006-2007)	<b>100% of infants and toddlers with IFSP’s will receive the early intervention services on their IFSP’s in a timely manner.</b>
<b>2007</b> (2007-2008)	<b>100% of infants and toddlers with IFSP’s will receive the early intervention services on their IFSP’s in a timely manner.</b>
<b>2008</b> (2008-2009)	<b>100% of infants and toddlers with IFSP’s will receive the early intervention services on their IFSP’s in a timely manner.</b>
<b>2009</b> (2009-2010)	<b>100% of infants and toddlers with IFSP’s will receive the early intervention services on their IFSP’s in a timely manner.</b>
<b>2010</b> (2010-2011)	<b>100% of infants and toddlers with IFSP’s will receive the early intervention services on their IFSP’s in a timely manner.</b>

**Improvement Activities/Timelines/Resources:**

<b>IMPROVEMENT ACTIVITY</b>	<b>TIMELINE</b>	<b>RESOURCES</b>
1. Allow Primary Level Evaluators to provide intervention services in areas of provider shortages to minimize the impact of provider shortages on timely service provision.	July 2005	Part C Coordinator
2. Provide training to the Technical Assistance Teams on service provision in a timely manner.	January 2006	Part C Coordinator; Training Coordinator; Quality Assurance Administrator

## SPP Template – Part C (3)

KENTUCKY

State

3. Provide training to the Service Coordinators on service provision in a timely manner.	March – June 2006	Technical Assistance Teams; Point of Entry Coordinator
4. Provide training to the Service Providers on service provision in a timely manner.	March – August 2006	Technical Assistance Teams
5. Provide Monitoring to review effects of training on service provision in a timely manner.	September 2006 – June 30, 2011	Program Evaluators; Quality Assurance Administrator; CBIS regional quarterly reports.
6. Investigate requiring semi-annual meetings/trainings for all providers in order to have a regular venue for trainings on changes and new developments such as timely services.	July 2006 – June 2007	Part C Coordinator; Technical Assistance Teams
7. Investigate having all independent Primary Service Coordinators under an umbrella of support, mentoring and supervision in order to observe and verify effects of training on topics such as timely services.	July 2008 – June 2009	Part C Coordinator; Training Coordinator; Technical Assistance Teams.